	States Bankr orthern District		ourt				Volunta	nry Petition
Name of Debtor (if individual, enter Last, First, Croxton, Elaine K	Middle):			of Joint De exton, He	erbert P) (Last, First	, Middle):	
All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):			used by the J maiden, and		in the last 8 years):			
Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all) xxx-xx-0770	yer I.D. (ITIN)/Comp	plete EIN	(if more	our digits of than one, state	all)	Individual-1	Γaxpayer I.D. (ITIN	N) No./Complete EIN
Street Address of Debtor (No. and Street, City, a 410 47th Street Canton, OH	, 	ZIP Code	410	Address of 47th Str iton, OH		(No. and Str	eet, City, and State	ZIP Code
County of Residence or of the Principal Place of Stark		14709	County Sta	•	nce or of the	Principal Pla	ace of Business:	44709
Mailing Address of Debtor (if different from stre	eet address):	ZIP Code	Mailin	g Address	of Joint Debto	or (if differen	nt from street addre	ess): ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):								
Type of Debtor (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. Corporation (includes LLC and LLP) Partnership Other (If debtor is not one of the above entities, check this box and state type of entity below.) Chapter 15 Debtors Country of debtor's center of main interests:	(Check Health Care Bus Single Asset Rein 11 U.S.C. § 1 Railroad Stockbroker Commodity Bro Clearing Bank Other	al Estate as de 01 (51B)	fined	☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte	the F er 7 er 9 er 11 er 12	Petition is Fi	napter 15 Petition f a Foreign Main Propagate 15 Petition f a Foreign Main Propagate 15 Petition f a Foreign Nonmai	for Recognition roceeding for Recognition
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	(Check box, Debtor is a tax-exe under Title 26 of t Code (the Internal	the United States	s	defined "incurr	are primarily co l in 11 U.S.C. § ed by an indivi- nal, family, or l	101(8) as dual primarily	for	Debts are primarily business debts.
Filing Fee (Check one box Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's considerati debtor is unable to pay fee except in installments. I Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's consideration)	individuals only). Must ion certifying that the Rule 1006(b). See Offici 7 individuals only). Mus	Check if: Deb Check if: Deb are 1 Check all a Check all a B.	tor is a sn tor is not tor's aggr less than \$ applicable lan is bein eptances of	egate nonco 52,490,925 (as boxes: g filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	efined in 11 United debts (exc to adjustment	C. § 101(51D). J.S.C. § 101(51D). Eluding debts owed to	o insiders or affiliates) y three years thereafter). of creditors,
Statistical/Administrative Information ■ Debtor estimates that funds will be available □ Debtor estimates that, after any exempt propthere will be no funds available for distribution	erty is excluded and a	administrative		s paid,		THIS	SPACE IS FOR CO	URT USE ONLY
1- 50- 100- 200-	1,000- 5,001- 5,000 10,000		5,001- 0,000	50,001- 100,000	OVER 100,000			
\$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1	\$1,000,001 \$10,000,001 to \$10 to \$50 million	to \$100 to	00,000,001 \$500 Ilion	\$500,000,001 to \$1 billion	More than \$1 billion			
	\$1,000,001 \$10,000,001 to \$10			\$500,000,001 to \$1 billion	More than \$1 billion			

B1 (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Croxton, Elaine K Croxton, Herbert P (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). and is requesting relief under chapter 11.) ☐ Exhibit A is attached and made a part of this petition. Signature of Attorney for Debtor(s) (Date) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? ☐ Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: **Exhibit D** also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

B1 (Official Form 1)(04/13) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Elaine K Croxton

Signature of Debtor Elaine K Croxton

X /s/ Herbert P Croxton

Signature of Joint Debtor Herbert P Croxton

Telephone Number (If not represented by attorney)

June 26, 2015

Date

Signature of Attorney*

X /s/ David A. Mucklow, Esq.

Signature of Attorney for Debtor(s)

David A. Mucklow, Esq.

Printed Name of Attorney for Debtor(s)

David A. Mucklow

Firm Name

919 East Turkeyfoot Lake Road Akron, OH 44312

Address

Email: davidamucklow@yahoo.com

330-896-4973 Fax: 330-896-8190

Telephone Number

June 26, 2015

Date

*In a case in which \S 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Croxton, Elaine K Croxton, Herbert P

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Ohio

	Elaine K Croxton		C N	
In re	Herbert P Croxton		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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statement.] [Must be accompanied by a motion for d □ Incapacity. (Defined in 11 U.S.C. § deficiency so as to be incapable of realizing a responsibilities.); □ Disability. (Defined in 11 U.S.C. §	109(h)(4) as impaired by reason of mental illness or mental and making rational decisions with respect to financial 109(h)(4) as physically impaired to the extent of being in a credit counseling briefing in person, by telephone, or
☐ 5. The United States trustee or bankruptcy requirement of 11 U.S.C. § 109(h) does not apply in	administrator has determined that the credit counseling this district.
I certify under penalty of perjury that the	information provided above is true and correct.
Signature of Debtor:	/s/ Elaine K Croxton Elaine K Croxton
Date: June 26, 2015	

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Ohio

In re	Elaine K Croxton Herbert P Croxton		Case No.	
		Debtor(s)	Chapter	13

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] ____

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

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□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable
statement.] [Must be accompanied by a motion for determination by the court.]
☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental
deficiency so as to be incapable of realizing and making rational decisions with respect to financial
responsibilities.);
☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being
unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or
through the Internet.);
☐ Active military duty in a military combat zone.
□ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ Herbert P Croxton
Herbert P Croxton
Date: June 26, 2015

United States Bankruptcy Court Northern District of Ohio

In re Elaine K Croxton,		Case No.	
Herbert P Croxton			
	Debtors	Chapter	13

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	2	892,300.00		
B - Personal Property	Yes	4	64,644.19		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	5		733,778.57	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		20,000.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		272,233.87	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			5,157.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			3,557.00
Total Number of Sheets of ALL Schedu	ıles	26			
	To	otal Assets	956,944.19		
		'	Total Liabilities	1,026,012.44	

United States Bankruptcy Court Northern District of Ohio

Elaine K Croxton, Herbert P Croxton		Case No.	Case No.		
	Debtors	Chapter	13		
STATISTICAL SUMMARY OF CERTA If you are an individual debtor whose debts are primarily con	sumer debts, as defined in §				
 a case under chapter 7, 11 or 13, you must report all informat Check this box if you are an individual debtor whose deport any information here. 	ion requested below. lebts are NOT primarily cons				
This information is for statistical purposes only under 28 Summarize the following types of liabilities, as reported in	the Schedules, and total the	hem.			
Type of Liability	Amount				
Domestic Support Obligations (from Schedule E)					
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)					
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)					
Student Loan Obligations (from Schedule F)					
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E					
Obligations to Pension or Profit-Sharing, and Other Similar Obliga (from Schedule F)	tions				
TO	ΓAL				
State the following:					
Average Income (from Schedule I, Line 12)					
Average Expenses (from Schedule J, Line 22)					
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)					
State the following:					
Total from Schedule D, "UNSECURED PORTION, IF ANY" column					
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY column	п				
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column					
4. Total from Schedule F					
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)					

101(8)), filing

Elaine K Croxton, **Herbert P Croxton**

Case No.	

Debtors

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
611 Delford Ave. NW, Massillon OH 44646 #4302751	Fee simple	W	52,000.00	6,244.70
8230-8232 Turquoise Ave. NE, Canton OH 44721 #5213702	Fee simple	W	81,200.00	86,333.26
4650 Revere Ave. NW, Massillon OH 44647 #1627970	Fee simple	J	61,700.00	0.00
1922 Tanner Ave. SW, Canton OH 44706 #243469 (RESIDENTIAL VACANT LAND)		W	2,100.00	8,209.05
8216-8218 Turquoise Ave. NE, Canton OH 44721 #5213701	Fee simple	w	83,800.00	86,740.96
3965 Orion St. NW, North Canton OH 44720 #5501101	Fee simple	J	108,800.00	80,812.64
1916 Lincoln Way NW, Massillon OH 44647 #605924 & #616597 (Vacant Land)	Fee simple	w	113,400.00	88,263.32
519 Woodside Ave. NE, North Canton OH 44720 #9208645	Fee simple	w	73,100.00	54,052.36
327 Lennox Ave. NW, Massillon OH 44646 #4304326	Fee simple	w	58,300.00	45,089.52
6092 Fulton Dr. NW, Canton OH 44718 #1615852	Fee simple	J	54,000.00	31,428.98
REVERE AVE NW , Massillon OH 44647 #1627969 Vacant Land		J	9,000.00	0.00
20th St SW, Canton OH 44706 # 223039 Vacant Land	Fee simple	W	3,000.00	0.00
Yuvunt Lung		Sub-Total	> 700,400.00	(Total of this page)

¹ continuation sheets attached to the Schedule of Real Property

In re Elaine K Croxton, Herbert P Croxton

Debtors

SCHEDULE A - REAL PROPERTY

(Continuation Sheet)

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
WOODSIDE AVE NE , North Canton OH 44720 #9208646 Other Structure		W	16,200.00	0.00
213 Linwood, N.W., Canton, OH 44708	Fee simple	н	106,000.00	87,373.54
513 Wrexham Ave., S.W., Massillon, OH 44646	Fee simple	J	69,700.00	27,409.44

Sub-Total > 191,900.00 (Total of this page)

Total > **892,300.00**

(Report also on Summary of Schedules)

Sheet ____ of ____ continuation sheets attached to the Schedule of Real Property

Elaine K Croxton, Herbert P Croxton

Debtors

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	X			
2.	Checking, savings or other financial		Checking - Chase xxxx5535	J	500.00
	accounts, certificates of deposit, or shares in banks, savings and loan,		Checking - Chase xxx9079	н	400.00
	thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or		Business Checking - Wayne Savings xxxx5251	J	900.00
	cooperatives.		Checking - Wayne Savings xxxx5558	J	63.37
			Business Checking - First National xxxx1712	J	41.84
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X			
4.	Household goods and furnishings, including audio, video, and computer equipment.	X			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6.	Wearing apparel.	X			
7.	Furs and jewelry.	X			
8.	Firearms and sports, photographic, and other hobby equipment.	X			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10.	Annuities. Itemize and name each issuer.	X			

Sub-Total >	1,905.21
(Total of this page)	

3 continuation sheets attached to the Schedule of Personal Property

In re	Elaine K Croxton,
	Herbert P Croxton

Case No.

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		IRA - UBS Financial	J	20,000.00
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.		LannieKay, LLC	J	16,373.00
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	X			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor		Judgment against Catherine Clay (2013-CVG-5708)	W	3,425.00
	including tax refunds. Give particulars.		Judgment against Siffrin, Inc. (2013-CVI-5429)	W	1,379.98
			Judgment against Natalia Amaya (2014-CVI-2877)	J	2,050.00
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.		Interest in Carroll Brady Irrevocable Trust as a beneficiary	J	Unknown
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > 43,227.98 (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re	Elaine K Croxton,
	Herbert P Croxton

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
clai tax deb	ther contingent and unliquidated ims of every nature, including refunds, counterclaims of the btor, and rights to setoff claims. we estimated value of each.	X			
inte	tents, copyrights, and other ellectual property. Give rticulars.	X			
gen	censes, franchises, and other neral intangibles. Give rticulars.	X			
con info § 1 by obt the	stomer lists or other compilations nataining personally identifiable formation (as defined in 11 U.S.C. 01(41A)) provided to the debtor individuals in connection with taining a product or service from the debtor primarily for personal, mily, or household purposes.	X			
	tomobiles, trucks, trailers, and	2003	Ford Expedition (130,000 miles)	н	3,061.00
oun	ner vehicles and accessories.	2002	Ford F350	W	0.00
		1907	Jewel D Runabout	н	5,700.00
26. Bo	ats, motors, and accessories.	1997	Sea Doo 10'	W	1,670.00
		1993	Sea Doo XP 8'	J	1,070.00
		1996	Rinker Boat Co. 18'	w	3,350.00
		1992	Godfrey Pontoon Boat 24'	w	4,160.00
		1996	Bombardier 10'	н	500.00
27. Air	rcraft and accessories.	X			
28. Off sup	fice equipment, furnishings, and oplies.	X			
	achinery, fixtures, equipment, and opplies used in business.	X			
30. Inv	entory.	X			

Sub-Total > 19,511.00 (Total of this page)

Sheet <u>2</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

Elaine K Croxton, In re **Herbert P Croxton**

Debtors

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > (Total of this page) 64,644.19 Total >

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

0.00

Elaine K Croxton, **Herbert P Croxton**

Debtors

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	☐ Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter
☐ 11 U.S.C. §522(b)(2)	with respect to cases commenced on or after the date of adjustment.)
11 U.S.C. 8522(b)(3)	

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Checking, Savings, or Other Financial Accounts, C Checking - Chase xxxx5535	ertificates of Deposit Ohio Rev. Code Ann. § 2329.66(A)(3)	500.00	500.00
Checking - Chase xxx9079	Ohio Rev. Code Ann. § 2329.66(A)(3)	400.00	400.00
Interests in IRA, ERISA, Keogh, or Other Pension of IRA - UBS Financial	r Profit Sharing Plans Ohio Rev. Code Ann. § 2329.66(A)(10)(c)	20,000.00	20,000.00
<u>Automobiles, Trucks, Trailers, and Other Vehicles</u> 1907 Jewel D Runabout	Ohio Rev. Code Ann. § 2329.66(A)(2)	3,675.00	5,700.00

24,575.00 26,600.00 Total:

Elaine K Croxton, **Herbert P Croxton**

Case No.	

Debtors

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLIQUIDA	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. XXXX-XXX -3138 CHASE BANK USA, NA WHITE CLAY CENTER 200 DR NEWARK Newark, DE 19711		w	Judgment Lien Judgment Lien xxx7346]	T E D			
Account No. Citibank South Dakota N.A. 701 E. 60th Street			Value \$ 0.00 Judgment Lien Judgment Lien				11,267.00	11,267.00
Sioux Falls, SD 57117 Account No.	1	W	Value \$ 0.00 Mortgage				Unknown	Unknown
Dollar Bank P.O. Box 765 Pittsburgh, PA 15230		J	4675 Yale Ave., N.W., Canton, OH					
			Value \$ 217,700.00	1			47,080.43	0.00
Account No. xxx3195 Fifth Third Bank 1349 W 5th Ave Columbus, OH 43212		w	Mortgage 1916 Lincoln Way NW, Massillon OH 44647 #605924 & #616597 (Vacant Land)					
			Value \$ 113,400.00	1			88,263.32	0.00
continuation sheets attached			(Total of t	Subt his			146,610.75	11,267.00

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH_ZGUZ	UNLLQULDAH	S	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxx5734 Fifth Third Bank 1349 W 5th Ave Columbus, OH 43212		J	Mortgage 519 Woodside Ave. NE, North Canton OH 44720 #9208645	Т	T E D			
Account No. xxx0787 Fifth Third Bank 1349 W 5th Ave Columbus, OH 43212		w	Value \$ 73,100.00 Mortgage 327 Lennox Ave. NW, Massillon OH 44646 #4304326 Value \$ 58,300.00				54,052.36 45,089.52	0.00
Account No. xxx9022 Fifth Third Bank 1349 W 5th Ave Columbus, OH 43212		J	Mortgage 6092 Fulton Dr. NW, Canton OH 44718 #1615852 Value \$ 54,000.00				31,428.98	0.00
Account No. xxxxxxx0374 First Merit 3 Cascade Plaza Akron, OH 44308		w	Judgment Lien Judgment Lien				Unknown	Unknown
Account No. xxxxx4310 Home Savings 275 West Federal Street Youngstown, OH 44501	•	w						
Sheet 1 of 4 continuation sheets atta-	che	l d to	Value \$ 81,200.00 S	ubt	ota	1	70,788.09 201,358.95	0.00
Schedule of Creditors Holding Secured Claims			(Total of th	is 1	oae	e)	201,330.93	0.00

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	Hu H W J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLLQULD	I S P U T	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. xxxxx4295	╁	H	Mortgage SUBJECT TO LIEN	Ĭ T	DATED		COLLATERAL	
Home Savings 275 West Federal Street Youngstown, OH 44501		w	8216-8218 Turquoise Ave. NE, Canton OH 44721 #5213701		D			
			Value \$ 83,800.00			Ш	70,788.64	0.00
Account No. xxxxxx9725 Huntington Bank 7575 Huntington Park Drive Columbus, OH 43235		J	Mortgage 3965 Orion St. NW, North Canton OH 44720 #5501101					
			Value \$ 108,800.00	1		П	80,812.64	0.00
Account No. Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101		J	Statutory Lien All Personal Property - Sch B					
			Value \$ 3,061.00	1		Ш	21,981.37	18,920.37
Account No. JPMorgan Chase Bank 201 North Central AZ1-1004 Phoenix, AZ 85004		J	Judgment Lien Judgment Lien Value \$ 0.00				Unknown	Unknown
Account No.	1	t	Mortgage			П		<u> </u>
PNC Bank, N.A. 2730 Liberty Ave. Pittsburgh, PA 15222		J	213 Linwood, N.W., Canton, OH 44708					
			Value \$ 106,000.00			Ц	71,935.89	0.00
Sheet <u>2</u> of <u>4</u> continuation sheets att Schedule of Creditors Holding Secured Clain		d to	(Total of	Sub this			245,518.54	18,920.37

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.) Account No.	C O D E B T O R	Hu H W	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN Mortgage	COZH_ZGEZH	DZ1_GD_D4HED		AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
PNC Bank, N.A. 2730 Liberty Ave. Pittsburgh, PA 15222		J	513 Wrexham Ave., S.W., Massillon, OH 44646				07.400.44	0.00
Account No. PNC Bank, N.A. 2730 Liberty Ave. Pittsburgh, PA 15222		J	Value \$ 69,700.00 Mortgage 1607 S. Main St., North Canton, OH				27,409.44	0.00
Account No. Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702		J	Value \$ 66,029.00 Statutory Lien 611 Delford Ave. NW, Massillon OH 44646 #4302751				51,492.00	0.00
Account No. Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702		J	Value \$ 52,000.00 Statutory Lien 8216-8218 Turquoise Ave. NE, Canton OH 44721 #5213701 Value \$ 83,800.00				6,244.70 15,952.32	2,940.96
Account No. Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702		J	Statutory Lien 8230-8232 Turquoise Ave. NE, Canton OH 44721 #5213702 Value \$ 81,200.00				15,545.17	5,133.26
Sheet <u>3</u> of <u>4</u> continuation sheets a Schedule of Creditors Holding Secured Clai		ed to	, , , , , , , , , , , , , , , , , , ,	ubt nis p		- 1	116,643.63	8,074.22

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	B	Hu H V C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	UNLLQULDAT	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			Statutory Lien	Т	T E D			
Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702		J	1922 Tanner Ave. SW, Canton OH 44706 #243469 (RESIDENTIAL VACANT LAND)					
	_		Value \$ 2,100.00			Ц	8,209.05	6,109.05
Account No.			Statutory Lien					
Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702		J	213 Linwood, N.W., Canton, OH 44708					
			Value \$ 106,000.00	1			15,437.65	0.00
Account No.	T		,	T		П	•	
			Value \$					
Account No.								
			Value \$					
Account No.	┪		, alde ¢	H		H		
			Value \$					
Sheet 4 of 4 continuation sheets attac Schedule of Creditors Holding Secured Claims	hed	l to	Subtotal (Total of this page)				23,646.70	6,109.05
-		Total (Report on Summary of Schedules)		- 1	733,778.57	44,370.64		

Elaine K Croxton, **Herbert P Croxton**

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." If the claim is disputed to the claim is disputed t "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.
☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. $\$$ 507(a)(3).
■ Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

continuation sheets attached

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Elaine K Croxton, Herbert P Croxton

Case No.		
Case No.		

Debtors

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT NLIQUI S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED AMOUNT w INCLUDING ZIP CODE, AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) DATED 2009 - 2015 Account No. 941 Taxes Internal Revenue Service Unknown P.O. Box 7346 Philadelphia, PA 19101 J 20,000.00 Unknown Income taxes-Notice purposes Account No. **Ohio Department of Taxation** Unknown **Bankruptcy Division** PO Box 530 Columbus, OH 43216 0.00 Unknown Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 0.00 Schedule of Creditors Holding Unsecured Priority Claims 20,000.00 Total 0.00

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Best Case Bankruptcy

0.00

20,000.00

(Report on Summary of Schedules)

In re	Elaine K Croxton,
	Herbert P Croxton

Case No.		

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	C	Н	usband, Wife, Joint, or Community	C	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	C N H	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETORE SO STATE		L	SPUTED	AMOUNT OF CLAIM
Account No. xxxx xxx-5651			2010 Lawsuit	T	T E D		
Accurate Heating and Cooling LLC 1635 Easton NE North Canton, OH 44720		v	Trade Debt			х	5,371.53
Account No. xxxxxxxxx2000			Credit card purchases	+	$^{+}$	\vdash	,
American Express P.O. Box 981537 El Paso, TX 79998		v	Trade Debt				
N	_		Loan Default	\downarrow	\downarrow	L	1,026.87
Account No. XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		v	Trade Debt				
Account No. xxxx xx x1390			2010	+	╀	L	944.00
BAC Home Loan Servicing 450 American Street MSN SV 35 SIMI Simi Valley, CA 93065		J	Foreclosure-deficiency	x	x		Unknown
5 continuation sheets attached		1	(Total o	Sub f this			7,342.40

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

				_				
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) Account No. xxxxxxxx0528	CODEBTOR	H W J	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UZL-QU-DAFED	Į į	ן ד ≣	AMOUNT OF CLAIM
BAC Home Loan Servicing 7105 Corporate Drive Plano, TX 75024		J	Torosiosare denoising	x	X	T		Unknown
Account No. xxxxxxx2515 Bank of New York c/o EMC Mortgage Corp. 2780 Lake Vista Drive Lewisville, TX 75067		J	2009 Foreclosure-deficiency	x	x			Unknown
Account No. xxxxxxx2056 Bank of New York Mellon c/o EMC Mortgage Corp. 909 Hidden Ridge Drive Irving, TX 75038		J	2009 Foreclosure-deficiency	x	x			Unknown
Account No. Bruner-Cox, LLP 4505 Stephen Circle, N.W. Ste. 200 Canton, OH 44735		J	2012 Professional fees					2,000.00
Account No. xxxx xx xxxxx xxxxxxx0353 Cache LLC (Wells Fargo) 4340 S. Monaco Street Denver, CO 80237		w	2012 Lawsuit - Trade Debt			,	x	42,601.24
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of t	Subt)	44,601.24

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

	_	_			_	_	
CREDITOR'S NAME,	000	l	sband, Wife, Joint, or Community		U N L	DI	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	NTINGEN	Q U I	S P U T E D	AMOUNT OF CLAIM
Account No. xxxxxxxxx4001			2010	Ť	D A T E D		
Chase Bank P.O. Box 9001022 Louisville, KY 40290-1022		w	Loan Default Trade Debt		D		50,646.05
Account No. xxxxxxxxx4004			2010		T	T	
Chase Bank P.O. Box 9001022 Louisville, KY 40290-1022		w	Loan Default Trade Debt				
							25,650.41
Account No. xxxx-xxxx-4011		Г	2010		T	T	
Chase Bank P.O. Box 15298 Wilmington, DE 19850		w	Credit card purchases - Trade Debt				10,965.96
Account No. xxxx-xxxx-xxxx-1191		┝	2010	+	┝	┝	10,300.30
Chase Bank P.O. Box 9001022 Louisville, KY 40290-1022		w	Credit card purchases Trade Debt				9,485.23
Account No. xxxxxxxxxxxxxxx			2010	T	T	T	
Chase Bank P.O. Box 15298 Wilmington, DE 19850		w	Loan Default Trade Debt				133.00
Sheet no. 2 of 5 sheets attached to Schedule of		_		Sub			96,880.65
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pag	ge)	30,000.05

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	·

Debtors SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CDEDITODIC NAME	С	Нι	sband, Wife, Joint, or Community		С	U	D	
CREDITOR'S NAME, MAILING ADDRESS	CODEBTO	Н			CONT	DZJ_GD	ISPUTE	
INCLUDING ZIP CODE,	Ē	l w	DATE CLAIM WAS INCURRED A	AND	T	ī	P	
	Β	ľ	CONSIDERATION FOR CLAIM. IF C	CLAIM	l N	Q	Ų	AMOUNT OF CLAIM
AND ACCOUNT NUMBER	ò	C	IS SUBJECT TO SETOFF, SO STA	TE.	G	Ĭ	Ė	AMOUNT OF CLAIM
(See instructions above.)	Ř	ľ			NGENH	D	D	
Account No.	Н	H	Civil		T			
Account No.	l	l				E		
	l	l		-	_	_	_	
Cole S. Neil	l	l						
4711 Yale Ave.	l	J			X	X	X	
Canton, OH 44709	l	l						
	l	l						
	l	l						
	l	l						Unknown
Account No. XXXXXXXXXXXXXX	┢	Н	Loan Default					
Account No. AAAAAAAAAAAAA	l	l	Trade Debt					
	l	l	Trade Debt					
Comenity Bank	l	l						
P.O. Box 182789	l	w	1				X	
Columbus, OH 43218	l	l						
0014111543, 011 43210	l	l						
	l	l						
	l	l						54.00
1044	⊢	⊢	10040		_		_	
Account No. xxxx-xxxx-xxxx-1944	ı	l	2010					
	l	l	Credit card purchases - Trade Debt					
First Merit	l	l						
P.O. Box 1499	l	lw	1					
Akron, OH 44309	l	l						
ARION, ON 44303	l	l						
	l	l						
	l	l						10,087.76
Account No. xxxx-xxxx-xxxx-0553	⊢	⊢	2010				_	
Account No. XXXX-XXXX-V333	l	l						
	l	l	Credit card purchases - Trade Debt					
First Merit	l	l						
P.O. Box 1499	l	lw	1					
Akron, OH 44309	l	l						
ARION, ON 44003	l	l						
	l	l						
	l	l						4,596.78
Account No. xxxx-xxxx-xxxx-9698	Н	H	2010			Н		
Account No. AAAA-AAAA-3030	l	l						
	ı	1	Credit card purchases - Trade Debt					
First Merit	ı	1						
2095 First Bancorp Cr.	ı	W	1					
Akron, OH 44307	l	l						
	ı	1						
	ı	1						40.074.00
	ı	1						16,271.09
Sheet no. 3 of 5 sheets attached to Schedule of		_	•	C,	ıb+	ota	<u> </u>	
								31,009.63
Creditors Holding Unsecured Nonpriority Claims				(Total of the	IS 1	oag	e)	l ' '

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	C	U	1)	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C J H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	ΙQ	F U	S	AMOUNT OF CLAIM
Account No. xxxxxxx0285			2015	Т	ΙE	ı		
James Priess 6092 Fulton Rd. NW Canton, OH 44718		J	Lawsuit - Trade Debt		D	t	x	Unknown
Account No. xxxx-xxxx-xxxx-8298			Credit card purchases - Trade Debt		T	t	1	
Key Visa P.O. Box 142319 Irving, TX 75014		w						22,438.22
Account No. xxxxxxxxxx2488		Г	Credit card purchases		T	t	T	
Lowes Business Acct/GEMB P.O. Box 530970 Atlanta, GA 30353		w						5,023.56
Account No. xxxxxxxx		Г	Medical Collections		Τ	T	T	
Mercy Medical Center P.O. Box 951082 Cleveland, OH 44193		J						187.00
Account No. xxxx4331			Loan Default		Γ	T	T	
PNC Bank P.O. Box 3180 Pittsburgh, PA 15230		w	Trade Debt					19,538.75
Sheet no. 4 of 5 sheets attached to Schedule of		_		Sub	tota	ıl	T	
Creditors Holding Unsecured Nonpriority Claims			(Total of	this	pas	ze`		47,187.53

In re	Elaine K Croxton,	Case No.
	Herbert P Croxton	

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	_ C	U	! !	D I	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	J H H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	L L QU L DA		SPUTED	AMOUNT OF CLAIM
Account No. xxx3331			Loan Default	T	Ϊ́Ε		Ī	
PNC Bank P.O. Box 3180 Pittsburgh, PA 15230		w	Trade Debt		D			34,690.12
Account No.			Professional fees - Trade Debt	T	T	T	T	
Protech Water System, Inc. 1900 Smith-Kramer Rd., N.E. Hartville, OH 44632		J						875.00
	L		Professional Services	\bot	╀	\downarrow	\dashv	875.00
Account No. RKKM 4598 Dressler Rd NW Canton, OH 44718		w						
						╧		8,739.26
Account No. xxxxxxxxxxxx9594 Synchrony Bank/Sams Club Bankruptcy Department P.O. Box 530961		w	Credit card purchases - Trade Debt					
Atlanta, GA 30353								
								908.04
Account No.	Γ			T	T	Ť	7	
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims			(Total of	Sub this			;)	45,212.42
			(Report on Summary of S.		Tot		- 1	272,233.87

Elaine K Croxton, **Herbert P Croxton**

Debtors

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Cynthia Sheegog 1918 Lincolnway N.W. Massillon, OH 44647

Real Estate Lease - 1918 Lincolnway N.W., **Massillon Ohio**

James R. Priess 6092 Fulton Dr. Canton, OH 44718 Land Contract - 6092 Fulton Dr. N.W., Canton, OH

Elaine K Croxton, **Herbert P Croxton**

Debtors

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Fill	in this information to identify yo	ur case:						
	btor 1 Elaine K							
	btor 2 Herbert F	Croxton						
Uni	ited States Bankruptcy Court for	the: NORTHERN DISTRI	CT OF OHIO					
	se number nown)		-				ed filing ent showing post-po	
\cap	fficial Form B 6I						as of the following	date:
	chedule I: Your Ir	come				MM / DD/ Y	/YYY	12/13
sup spo atta	as complete and accurate as polying correct information. If youse. If you are separated and ich a separate sheet to this for the Describe Employment 1:	ou are married and not fil your spouse is not filing w m. On the top of any addit	ing jointly, and your vith you, do not inclu	spouse ude infor	is liv mati	ing with you, inc	lude information a ouse. If more space	about your ce is needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	2 or non-filing spo	ouse
	If you have more than one job	, E	■ Employed			☐ Empl	oyed	
	attach a separate page with information about additional	Employment status	☐ Not employed			■ Not e	mployed	
	employers.	Occupation	Real Estate Age	ent		Retired	I	
	Include part-time, seasonal, o self-employed work.	Employer's name						
	Occupation may include stude or homemaker, if it applies.	ent Employer's address						
		How long employed t	there?					
Pai	rt 2: Give Details About	•						
Esti	imate monthly income as of thuse unless you are separated.		f you have nothing to	report for	any	line, write \$0 in the	e space. Include yo	ur non-filing
-	ou or your non-filing spouse have e space, attach a separate shee		combine the information	on for all	empl	oyers for that pers	on on the lines belo	ow. If you need
						For Debtor 1	For Debtor 2 or non-filing spou	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	0.00	\$0	0.00
3.	Estimate and list monthly or	vertime pay.		3.	+\$	0.00	+\$	0.00
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	0.00	\$0.0	0

Debtor 1 Elaine K Croxton
Herbert P Croxton

Case number (if known)

				Fo	r Debtor 1		Debtor 2 or	
	Conv	y line 4 here	4.	\$	0.00	\$	n-filing spouse 0.00	
	OOP,	/ line 4 nere	٠.	Ψ_	0.00	Ψ_	0.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$_	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$_	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	: -	0.00	+ \$ _	0.00	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	0.00	\$ 	0.00	
7.			7.	\$ _		\$_ \$		
1.	Caic	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	Φ_	0.00	Φ_	0.00	
8.	List a	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	2,153.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$_	0.00	
	8e.	Social Security	8e.	\$_	1,180.00	\$_	1,824.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$_	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,333.00	\$	1,824.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		3,333.00 + \$_	1,	824.00 = \$ <u>5,157.0</u>	00
11.	Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not lify:	deper					<u>)0</u>
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaes					12. \$ 5,157. 0	
13.	Do ye	ou expect an increase or decrease within the year after you file this form' No. Yes Explain:	?				monthly income	;

 	in this informa	ation to identify yo	our case:						
Deb	tor 1	Elaine K Cro	xton			Che	ck if this is:		
							An amended filing		
Deb	tor 2	Herbert P Cr	oxton					ving post-petition chapter	
(Spc	ouse, if filing)						13 expenses as of	the following date:	
Linita	ad States Banki	runtey Court for the	· NORTH	IERN DISTRICT OF OHIO	ı		MM / DD / YYYY		
Office	eu States Dariki	rupicy Court for the.	NONTH	ILNIV DISTRICT OF OTHO	<u></u>		IVIIVI / DD / TTTT		
Case	e number							r Debtor 2 because Debto	ır
(lf kr	nown)						2 maintains a sepa	rate household	
Of	ficial Fo	rm B 6J							
			=						
Sc	chedule	J: Your	Expen	ises				12/1	3
Be a	as complete	and accurate as	possible.	. If two married people and the control of the cont	e filing together, be	oth are eq	ually responsible f	or supplying correct	
		n). Answer ever			ionii. On the top of	ally addit	ionai pages, write	your name and case	
D	_								
Pan 1.	Is this a join	ribe Your House	noia						_
١.	□ No. Go to								
	■ Yes. Doe	es Debtor 2 live	ın a separ	ate household?					
		lo							
	□ Y	es. Debtor 2 mus	st file a sep	parate Schedule J.					
2.	Do you hay	e dependents?	■ Na						
۷.	•	•	■ No						
	Do not list D		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state			caon acponacii	Debtor 1 or Debtor	_		□ No	
	dependents							☐ Yes	
								□ No	
								☐ Yes	
							_	□ No	
								☐ Yes	
								□ No	
							_	☐ Yes	
3.		penses include	. •	No					
		f people other t d your depende		Yes					
	yoursen un	a your acpenae							
Par		nate Your Ongoi							_
				uptcy filing date unless y y is filed. If this is a supp					
	licable date.		Junia upio	y is med. If this is a supp	nemental conedate	o, oncor	ine box at the top t	or the form and mir ment	
			•						
				government assistance i cluded it on <i>Schedule I:</i> \					
	icial Form 6		a nave me	nadea it on ooneaale ii.	our moonic		Your exp	enses	
		_							
4.		or home owners nd any rent for th		ses for your residence.	nclude first mortgage	e 4.	\$	0.00	
	payments a	nd any rention th	e ground o	ii iot.		••			
	If not include	ded in line 4:							
	4a. Real	estate taxes				4a.	\$	377 00	
		estate taxes erty, homeowner's	s. or renter	's insurance		4a. 4b.	·	377.00 262.00	
	-	-		upkeep expenses		4c.		75.00	
		eowner's associat					\$	0.00	
5.	Additional	mortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	\$	0.00	

Official Form B 6J Schedule J: Your Expenses page 1

Herbert P Croxton ies: Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs hing, laundry, and dry cleaning onal care products and services cal and dental expenses	6a. 6b. 6c. 6d. 7. 8. 9.	\$ \$ \$	400.00 67.00 250.00 0.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs ning, laundry, and dry cleaning onal care products and services	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$	67.00 250.00 0.00
Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs ning, laundry, and dry cleaning onal care products and services	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$	67.00 250.00 0.00
Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs hing, laundry, and dry cleaning onal care products and services	6b. 6c. 6d. 7. 8. 9.	\$ \$ \$ \$	67.00 250.00 0.00
Telephone, cell phone, Internet, satellite, and cable services Other. Specify: I and housekeeping supplies Icare and children's education costs hing, laundry, and dry cleaning onal care products and services	6c. 6d. 7. 8. 9.	\$ \$ \$	250.00 0.00
Other. Specify: I and housekeeping supplies Icare and children's education costs ning, laundry, and dry cleaning onal care products and services	6d. 7. 8. 9.	\$	0.00
l and housekeeping supplies Icare and children's education costs ning, laundry, and dry cleaning onal care products and services	7. 8. 9.	\$.
lcare and children's education costs ning, laundry, and dry cleaning onal care products and services	8. 9.	*	450.00
ning, laundry, and dry cleaning onal care products and services	9.	Φ.	453.00
onal care products and services	_	\$	0.00
•		\$	0.00
cal and dental expenses	10.	\$	25.00
our unit donier experience	11.	\$	300.00
sportation. Include gas, maintenance, bus or train fare.			200.00
ot include car payments.	12.	•	200.00
rtainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
itable contributions and religious donations	14.	\$	0.00
rance.			
	4.5	Φ.	
		·	733.00
		*	415.00
		·	0.00
	15d.	\$	0.00
	16.	\$	0.00
	47	Φ.	
		·	0.00
	-		0.00
		·	0.00
· · ·		\$	0.00
	10	Ф	0.00
	10.		
	40	5	0.00
		·	
			0.00
			0.00
		·	0.00
· ·			0.00
		·	0.00
		·	0.00
r: Specify:	21.	+\$	0.00
monthly expenses Add lines 4 through 21	22	\$	3,557.00
		· —	3,337.00
, , ,			
	23a.	\$	5,157.00
			3,557.00
copy your monthly expended from the 22 above.	200.	Ψ	3,337.00
Subtract your monthly expenses from your monthly income			
	23c.	\$	1,600.00
cample, do you expect to finish paying for your car loan within the year or do you expect your recation to the terms of your mortgage?			r decrease because of a
	ot include insurance deducted from your pay or included in lines 4 or 20. Life insurance Health insurance Vehicle insurance Other insurance. Specify: s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify: Ilment or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Dayments of alimony, maintenance, and support that you did not report as cted from your pay on line 5, Schedule I, Your Income (Official Form 6I). repayments you make to support others who do not live with you. ify: r real property expenses not included in lines 4 or 5 of this form or on Scheding Sch	tinclude insurance deducted from your pay or included in lines 4 or 20. Life insurance 15a. Health insurance 15c. Other insurance. Specify: 15d. s. Do not include taxes deducted from your pay or included in lines 4 or 20. Ify: 15d. Ilment or lease payments: 16c. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Other. Specify: 17c. Other specify: 17c. Othe	to include insurance deducted from your pay or included in lines 4 or 20. Life insurance

United States Bankruptcy Court Northern District of Ohio

In re	Elaine K Croxton Herbert P Croxton		Case No.	
		Debtor(s)	Chapter	13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

	I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of				
Date	June 26, 2015	Signature	/s/ Elaine K Croxton Elaine K Croxton Debtor		
Date	June 26, 2015	Signature	/s/ Herbert P Croxton Herbert P Croxton Joint Debtor		

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

United States Bankruptcy Court Northern District of Ohio

	Elaine K Croxton			
In re	Herbert P Croxton		Case No.	
		Debtor(s)	Chapter	13

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$0.00 2013 Wife Gross Income n/a \$0.00 2014 Wife Gross Income n/a

\$12,654.00 2015 Wife Y-T-D

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$21,600.00 2013 Husband Social Security est.

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AMOUNT SOURCE

\$13,900.00 2013 Wife Social Security est. \$21,700.00 2014 Husband Social Security est. 2014 Wife Social Security est.

\$14,000.00

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL AMOUNT PAID OF CREDITOR **PAYMENTS OWING**

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT DATES OF PAID OR AMOUNT STILL PAYMENTS/ VALUE OF NAME AND ADDRESS OF CREDITOR **TRANSFERS** OWING **TRANSFERS**

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND DATE OF PAYMENT RELATIONSHIP TO DEBTOR

AMOUNT STILL AMOUNT PAID OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None П

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR DISPOSITION AND CASE NUMBER **PROCEEDING** AND LOCATION James R. Priess v. Elaine K Croxton & Hurbert P Civil **Stark County Court of Common Pleas Pending**

Croxton

2015 CV 00285

Cach LLC v. Elaine K Croxton et. al. Civil **Court of Common Pleas Stark County Pending** 2015 CV 00353

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

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10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

RELATIONSHIP TO DEBTOR DATE (ship) 1/2014

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

Trade-in - 2005 Lincoln

Third Party

None

Dealership

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

First National Bank

Insurance Policies

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL

LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which None

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

П

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL

TAXPAYER-I.D. NO.

ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

Croxton Realty Co.

(ITIN)/ COMPLETE EIN 341576062

410 47th St., N.W.

Real Estate Agency

1988 - 2013

Canton, OH 44709

Real Estate

2013 - Present

Lanniekay, LLC

35-2470497

410 47th St., N.W. Canton, OH 44709

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Bruce A. McDonnell, CPA 4598 Dressler Road Canton, OH 44718

DATES SERVICES RENDERED 32 years

None b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME **ADDRESS** DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

ADDRESS NAME

B7 (Official Form 7) (04/13)

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Q,

25. Pension Funds.

None I

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date	June 26, 2015	Signature	/s/ Elaine K Croxton	
			Elaine K Croxton	
			Debtor	
Date	June 26, 2015	Signature	/s/ Herbert P Croxton	
			Herbert P Croxton	
			Joint Debtor	

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

United States Bankruptcy Court Northern District of Ohio

In re	Elaine K Croxton Herbert P Croxton		Case No).	
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR I	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 compensation paid to me within one year before the filir be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	, or agreed to be pa	id to me, for services	
	For legal services, I have agreed to accept		\$	2,625.00	
	Prior to the filing of this statement I have received.		\$	2,500.00	
	Balance Due		\$	125.00	
2.	\$_310.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	n unless they are me	embers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the narrow of the agreement.				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	ets of the bankruptc	y case, including:	
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho 	ement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparation	th may be required; and any adjourned be cemption plannir	nearings thereof;	d filing of
7.	By agreement with the debtor(s), the above-disclosed fer Representation of the debtors in any disany other adversary proceeding.			nces, relief from st	ay actions or
		CERTIFICATION			
	I certify that the foregoing is a complete statement of any pankruptcy proceeding.	y agreement or arrangement fo	r payment to me for	representation of the	debtor(s) in
Date	d: June 26, 2015	/s/ David A. Muc	klow, Esq.		
		David A. Mucklo	w, Esq.		
		David A. Mucklo 919 East Turkey			
		Akron, OH 4431	2		
		330-896-4973 F davidamucklow	ax: 330-896-8190		
		uaviualiluckiow	⊌yanoo.com		

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF OHIO

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Ohio

In re	Elaine K Croxton Herbert P Croxton		Case	No.	
		Deb	tor(s) Chap	ter 13	
			O CONSUMER DEB BANKRUPTCY COD	` ′	
Code.	I (We), the debtor(s), affirm that I (we) ha	Certification of aver received and read		aired by § 3	342(b) of the Bankruptcy
	e K Croxton ert P Croxton	X	/s/ Elaine K Croxton		June 26, 2015
Printe	d Name(s) of Debtor(s)		Signature of Debtor		Date
Case N	No. (if known)	X	/s/ Herbert P Croxton		June 26, 2015
			Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

United States Bankruptcy Court Northern District of Ohio

	Herbert P Croxton		Case No.	
	Debtor(s)	Chapter	13	
	VER	RIFICATION OF CREDITOR	R MATRIX	
Γhe ab	ove-named Debtors hereby verify	that the attached list of creditors is true and	correct to the best of	of their knowledge.
Date:	June 26, 2015	/s/ Elaine K Croxton		
Date:	June 26, 2015	/s/ Elaine K Croxton Elaine K Croxton		
Date:	June 26, 2015			
	June 26, 2015 June 26, 2015	Elaine K Croxton		
		Elaine K Croxton Signature of Debtor		

Elaine K Croxton

KRISTEN FITCHKO, ESQ 4775 MUNSON ST NW P.O. BOX 36963 Canton, OH 44735

Accurate Heating and Cooling LLC 1635 Easton NE North Canton, OH 44720

American Express P.O. Box 981537 El Paso, TX 79998

ANDREW VOORHEES, ESQ WELTMAN WEINBERG AND REIS CO LPA 323 LAKESIDE AVENUE, WEST Cleveland, OH 44113

Angela Kirk, Esq P.O. Box 165028 Columbus, OH 43216

Anthony DeGirolamo, Esq 116 Cleveland Ave. NW Canton, OH 44702

ANTHONY J DEGIROLAMO 116 CLEVELAND AVE NW Canton, OH 44702

BAC Home Loan Servicing 450 American Street MSN SV 35 SIMI Simi Valley, CA 93065

BAC Home Loan Servicing 7105 Corporate Drive Plano, TX 75024

Bank of New York c/o EMC Mortgage Corp. 2780 Lake Vista Drive Lewisville, TX 75067 Bank of New York Mellon c/o EMC Mortgage Corp. 909 Hidden Ridge Drive Irving, TX 75038

Bethany Suttinger 120 E. 4th Street Cincinnati, OH 45202

Bruner-Cox, LLP 4505 Stephen Circle, N.W. Ste. 200 Canton, OH 44735

Cache LLC (Wells Fargo) 4340 S. Monaco Street Denver, CO 80237

Charles Vincent Gasior, Esq 4500 Courthouse Blvd. Stow, OH 44224

Chase Bank P.O. Box 9001022 Louisville, KY 40290-1022

Chase Bank
P.O. Box 15298
Wilmington, DE 19850

CHASE BANK USA, NA WHITE CLAY CENTER 200 DR NEWARK Newark, DE 19711

Christopher Casterlin, Esq 24755 Chagrin Blvd. Suite 200 Beachwood, OH 44122

Citibank South Dakota N.A. 701 E. 60th Street Sioux Falls, SD 57117

Cole S. Neil 4711 Yale Ave. Canton, OH 44709

Comenity Bank P.O. Box 182789 Columbus, OH 43218

Cynthia Sheegog 1918 Lincolnway N.W. Massillon, OH 44647

David Weimer 1790 Town Park Blvd., Ste B Uniontown, OH 44685

Dollar Bank P.O. Box 765 Pittsburgh, PA 15230

Donald Mausar, Esq Lakeside Place, Suite 200 323 W. Lakeside Ave Cleveland, OH 44113

EDWARD BUEHRLE, ESQ 50 S MAIN ST SUITE 501 Akron, OH 44308

Elizabeth A. Burick 1428 Market Ave. North Canton, OH 44714

Fifth Third Bank 1349 W 5th Ave Columbus, OH 43212

First Merit P.O. Box 1499 Akron, OH 44309

First Merit 2095 First Bancorp Cr. Akron, OH 44307 First Merit 3 Cascade Plaza Akron, OH 44308

Home Savings 275 West Federal Street Youngstown, OH 44501

Huntington Bank 7575 Huntington Park Drive Columbus, OH 43235

Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101

Internal Revenue Service Insolvency Group 1240 East 9th Street Room 403 Cleveland, OH 44199

James Priess 6092 Fulton Rd. NW Canton, OH 44718

James R. Priess 6092 Fulton Dr. Canton, OH 44718

JPMorgan Chase Bank 201 North Central AZ1-1004 Phoenix, AZ 85004

Key Visa
P.O. Box 142319
Irving, TX 75014

Lowes Business Acct/GEMB P.O. Box 530970 Atlanta, GA 30353

Mallory Johnson-Sestic, Esq Fifth Third Bank 38 Fountain Square Plaza MD 10AT76 Cincinnati, OH 45263

Melanie Butler, Esq 120 E. 4th St. Suite 800 Cincinnati, OH 45202

Melissa Hamble, Esq P.O. Box 165028 Columbus, OH 43216

Mercy Medical Center P.O. Box 951082 Cleveland, OH 44193

Mercy Medical Center c/o 5500 New Albany Rd Ste 200 New Albany, OH 43054

Merry, Thomas, Read, Barren & Merry Co., LPA 110 Polaris Parkway, Ste. 302 Westerville, OH 43082

MICHAEL A THOMPSON, ESQ 4774 MUNSON ST NW SUITE 400 Canton, OH 44718

Ohio Department of Taxation Bankruptcy Division PO Box 530 Columbus, OH 43216

PNC Bank
P.O. Box 3180
Pittsburgh, PA 15230

PNC Bank, N.A. 2730 Liberty Ave. Pittsburgh, PA 15222 Protech Water System, Inc. 1900 Smith-Kramer Rd., N.E. Hartville, OH 44632

Rebecca Shrader, Esq 720 Olive Way Suite 1201 Seattle, WA 98101

Richard Nicodemo, Esq 124 15th Street NW Canton, OH 44718

RKKM 4598 Dressler Rd NW Canton, OH 44718

Stark County Auditor 110 Central Plaza South Suite 220 Canton, OH 44702

Synchrony Bank/Sams Club Bankruptcy Department P.O. Box 530961 Atlanta, GA 30353

Tonya Rogers, Esq 400 South Main Street North Canton, OH 44720

WELTMAN, WEINBERG & REIS 323 W LAKESIDE AVE Cleveland, OH 44113

Fill in this info	Fill in this information to identify your case:				
Debtor 1	Elaine K Croxton				
Debtor 2 (Spouse, if filing	Herbert P Croxton				
United States E	Bankruptcy Court for the: Northern District of Ohio				
Case number (if known)					

Checl	Check as directed in lines 17 and 21:						
	According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
	3. The commitment period is 3 years.						
	4. The commitment period is 5 years.						

☐ Check if this is an amended filing

Official Form 22C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	you have nothing to report for any line, write \$0		J 400.							
							Column Debtor		Columi Debtor non-fil	
2.	Your gross wages, salary, tips, bonuses, ovall payroll deductions).	ertime,	and co	mmissi	ons (b	efore	\$	0.00	\$	0.00
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.				use if	\$	0.00	\$	0.00		
5.	of you or your dependents, including child seems an unmarried partner, members of your hour and roommates. Include regular contributions fulfilled in. Do not include payments you listed on Net income from operating a business, professional payments.	ouseholo rom a sp line 3.	d, your oouse c	depende only if Co	ents, p olumn	arents,	\$	0.00	\$	0.00
	Gross receipts (before all deductions)	\$_		3,30	7.66					
	Ordinary and necessary operating expenses	-\$		3,43	5.13					
	Net monthly income from a business, profession, or farm	\$_			0.00	Copy here -> S	\$	0.00	\$	0.00
6.	Net income from rental and other real prope	rty								
	Gross receipts (before all deductions)		\$	0.00						
			Φ.	0.00						
	Ordinary and necessary operating expenses		- Φ	0.00						

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 1

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Best Case Bankruptcy

Debtor	1
Debtor	2

Elaine K Croxton

2 <u> </u>	erbert P Croxton				Case number	(II KIIOWII)			
					Column A Debtor 1		Debtor 2	2 or	
nteres	t, dividends, and royalties				\$	0.00	\$	0.00	
Unemp	loyment compensation				\$	0.00	\$	0.00	
under th	ne Social Security Act. Instead,	list it here:	ceived was a benef	it					
For y	ou	\$	0.0	00					
For y	our spouse	\$ <u> </u>	0.0	00					
		ot include any amour	nt received that wa	s a	\$	0.00	\$	0.00	
Do not i receive domest	include any benefits received u d as a victim of a war crime, a o ic terrorism. If necessary, list o	nder the Social Sectorime against human	urity Act or paymen nity, or international	ts or					
10a.	IRA Distribution				\$ 2,3	300.00	\$	4,171.50	
10b.					\$	0.00	\$	0.00	
10c.	Total amounts from separate	pages, if any.		+	\$	0.00	\$	0.00	
				\$	2,300.00	+ \$ _	4,171.50	_ = \$	6,471.50
2: 1	Determine How to Measure Y	our Deductions fro	m Income						otal average onthly income
Copy y	our total average monthly inc ate the marital adjustment. Ch	come from line 11.						\$	6,471.50
□ Yo	ou are not married. Fill in 0 on li	ne 3d.							
Yo	ou are married and your spouse	is filing with you. Fil	l in 0 in line 13d.						
de	pendents, such as payment of	the spouse's tax liab	ility or the spouse's	s supp	ort of someon	e other t	than you or y	your depen	dents.
ad	justments on a separate page.	-	ome and the amour	nt of inc	come devoted	to each	purpose. If	necessary	, list additional
		enter 0 on line 13d.		•					
				\$		_			
				Φ_		_			
				- • _					
13	3d. Total			\$	0.0	<u>0</u> c	opy here=> 1	3d	0.00
Your	current monthly income. Sub	tract line 13d from li	ne 12.					14. \$	6,471.50
Calcu	late your current monthly inc	ome for the year. F	Follow these steps:						
15a.	Copy line 14 here=>						1	5a. \$	6,471.50
								x	12
15b.	The result is your current mont	hly income for the ye	ear for this part of t	he forn	1.		1	5b. \$	77,658.00
	Interes Unemp Do not under the For y For y Pension of the Control	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contended the Social Security Act. Instead, For you For your spouse Pension or retirement income. Do not benefit under the Social Security Act. Income from all other sources not lip Do not include any benefits received us received as a victim of a war crime, a colomestic terrorism. If necessary, list of iotal on line 10c. 10a. IRA Distribution 10b. 10c. Total amounts from separate Calculate your total average monthly each column. Then add the total for Colomestic termine How to Measure Your are married and your spouse Fill in the amount of the income lied dependents, such as payment of In lines 13a-c, specify the basis for adjustments on a separate page. If this adjustment does not apply, 13a. 13b. 13c. 13d. Total Your current monthly income. Sub Calculate your current monthly income. Calculate your current monthly income. Sub Calculate your current monthly income. Calculate your current monthly income. Sub Calculate your current monthly income.	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount recurder the Social Security Act. Instead, list it here: For you \$ For your spouse \$ Pension or retirement income. Do not include any amour openefit under the Social Security Act. Income from all other sources not listed above. Specify Do not include any benefits received under the Social Security Act. Income from all other sources not listed above. Specify Do not include any benefits received under the Social Secureceived as a victim of a war crime, a crime against humar domestic terrorism. If necessary, list other sources on a seriotal on line 10c. 10a. IRA Distribution 10b. 10c. Total amounts from separate pages, if any. Calculate your total average monthly income. Add lines each column. Then add the total for Column A to the total for Column A to the total for Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Colum dependents, such as payment of the spouse's tax liab. In lines 13a-c, specify the basis for excluding this income adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total Your current monthly income. Subtract line 13d from line Calculate your current monthly income for the year. Fill 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a substract line 15a by 12 (the number of months in a sub	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefunder the Social Security Act. Instead, list it here: For you \$ 0.0 For your spouse \$ 0.0 Pension or retirement income. Do not include any amount received that wa benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and an Do not include any benefits received under the Social Security Act or paymen received as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page and protal on line 10c. 10a. IRA Distribution 10b. 10c. Total amounts from separate pages, if any. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 2: Determine How to Measure Your Deductions from Income Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one: You are married and your spouse is filling with you. Fill in 0 in line 13d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NO dependents, such as payment of the spouse's tax liability or the spouse's In lines 13a-c, specify the basis for excluding this income and the amour adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13b. 13c. 13d. Total Your current monthly income. Subtract line 13d from line 12. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here⇒ Multiply line 15a by 12 (the number of months in a year).	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a. IRA Distribution 10b. 10c. Total amounts from separate pages, if any. Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 2: Determine How to Measure Your Deductions from Income Copy your total average monthly income from line 11. Calculate the maritial adjustment. Check one: You are not married. Fill in 0 on line 3d. You are married and your spouse is not filling with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regu dependents, such as payment of the spouse's tax liability or the spouse's supp In lines 13a-c, specify the basis for excluding this income and the amount of in adjustments on a separate page. If this adjustment does not apply, enter 0 on line 13d. 13a. 13a. 13b. 13c. 49 Your current monthly income. Subtract line 13d from line 12. Calculate your current monthly income for the year. Follow these steps: 15a. Copy line 14 here Multiply line 15a by 12 (the number of months in a year).	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 For your spouse \$ 0.00 Fension or retirement income. Do not include any amount received that was a senefit under the Social Security Act. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments eceived as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the otal on line 10c. 10a. IRA Distribution \$ 2,* 10b. \$ 10c. Total amounts from separate pages, if any. 2c. Determine How to Measure Your Deductions from Income Copy your total average monthly income. Add lines 2 through 10 for seach column. Then add the total for Column A to the total for Column B. 2c. Determine How to Measure Your Deductions from Income Copy your total average monthly income from line 11. 2calculate the marital adjustment. Check one: 1 You are married and your spouse is filing with you. Fill in 0 in line 13d. 2 You are married and your spouse is not filing with you. 2 Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the dependents, such as payment of the spouse's tax lability or the spouse's support of someon in lines 13a-c, specify the basis for excluding this income and the amount of income devoted adjustments on a separate page. 1 this adjustment does not apply, enter 0 on line 13d. 13a. \$ 13b. \$ 13c. \$	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you	Interest, dividends, and royalties Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you \$ 0.00 Pension or retirement income. Do not include any amount received that was a senefit under the Social Security Act. Pension or retirement income. Do not include any amount received that was a senefit under the Social Security Act. Pension or retirement income. Do not include any amount received that was a senefit under the Social Security Act. Pension or retirement income. Do not include any amount received that was a senefit under the Social Security Act. Pension of the social Security Act. Pension or retirement income. Do not include any benefits received under the Social Security Act or payments covered as a social security act or international or cornectic terrorism. If necessary, list other sources on a separate page and put the other of the social Security Act. Pension or retirement income. Pension or retirement income. Pension or retirement income. Security Act. Pension or retirement income. Pension or retirement and amount. Pension or retirement income. Pension or retir	Interest, dividends, and royalties Interest, dividends, and royal

Debtor 1 Debtor 2 Elaine K Croxton Herbert P Croxton

Case number (if known)

16a. Fi	III in the state in which you live.	ОН				
	·					
16b. Fi	Ill in the number of people in your household.	2				
To	Il in the median family income for your state and s o find a list of applicable median income amounts, structions for this form. This list may also be avail	go online using the linl		16c.	\$	54,420.00
How d	o the lines compare?					
17a.	☐ Line 15b is less than or equal to line 16c. On 11 U.S.C. § 1325(b)(3). Go to Part 3. Do No					determined und
17b.	Line 15b is more than line 16c. On the top of 1325(b)(3). Go to Part 3 and fill out Calcul current monthly income from line 14 above.					
3:	Calculate Your Commitment Period Under 11 L	J.S.C. §1325(b)(4)				
Соруу	your total average monthly income from line 11	•		18.	\$	6,471.50
Deduction content spouse	It the marital adjustment if it applies. If you are a distributed that calculating the commitment period under 11 s's income, copy the amount from line 13d.	married, your spouse is U.S.C. § 1325(b)(4) al	not filing with you, and you			
If the m	narital adjustment does not apply, fill in 0 on line 1	9a.		19a. - :	\$	0.00
Subtra	act line 19a from line 18.			19b.	\$	6,471.50
Calcul	ate your current monthly income for the year.	Follow these steps:				
20a. C	opy line 19b			20a.	\$	6,471.50
М	ultiply by 12 (the number of months in a year).				x	12
20b. Tł	he result is your current monthly income for the ye	ar for this part of the fo	rm	20b.	\$	77,658.00
20c. C	opy the median family income for your state and s	ize of household from I	ine 16c		\$	54,420.00
21. H	ow do the lines compare?					
	Line 20b is less than line 20c. Unless otherwis period is 3 years. Go to Part 4.	e ordered by the court,	on the top of page 1 of this form	, check	box 3,	The commitmen
	Line 20b is more than or equal to line 20c. Unlocommitment period is 5 years. Go to Part 4.	ess otherwise ordered l	by the court, on the top of page 1	of this	form, c	heck box 4, The
	Sign Below					
By sigr	ning here, under penalty of perjury I declare that the		·	is true	and cor	rect.
	laine K Croxton		Herbert P Croxton			
	ne K Croxton tture of Debtor 1		rbert P Croxton nature of Debtor 2			
	June 26, 2015 MM / DD / YYYY	Date	June 26, 2015 MM / DD / YYYY			
If you c	checked 17a, do NOT fill out or file Form 22C-2.					

Official Form 22C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

page 3

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Best Case Bankruptcy

Fill in this information to identify your case:					
Debtor 1	Elaine K Croxton				
Debtor 2	Herbert P Croxton				
(Spouse, if filing) United States Bankruptcy Court for the: Northern District of Ohio					
Case number					
(if known)					

☐ Check if this is an amended filing

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

12/14

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly income and Calculation of Commitment Period (Official Form 22C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 22C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 22C–1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

5. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

\$ 1,092.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

page 1

	who are under 65 years of age		
7a.	Out-of-pocket health care allowance per person	\$60_	
7b.	Number of people who are under 65	X2	
7c.	Subtotal. Multiply line 7a by line 7b.	\$120.00 Copy line 7c here=> \$120	.00
eople v	who are 65 years of age or older		
7d.	Out-of-pocket health care allowance per person	\$144_	
7e.	Number of people who are 65 or older	x <u> </u>	
7f.	Subtotal. Multiply line 7d by line 7e.	\$ Copy line 7f here=> \$.00_
7g.	Total. Add line 7c and line 7f	\$ 120.00 Copy total here	=> 7g. \$ 120.00
:Darau		e available at the bankrubtcy cierk's office.	-
Hou fill in Hou 9a.	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insurar using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense Total average monthly payment for all mortgages To calculate the total average monthly payment, a	thin the dollar amount \$	
Hou fill in Hou 9a.	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	nses: Using the number of people you entered in line 5, e and operating expenses. I in the dollar amount \$ 892 Ind other debts secured by your home. It all amounts that are months after you file	
fill in Hou	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6	nses: Using the number of people you entered in line 5, e and operating expenses. I in the dollar amount d other debts secured by your home. d all amounts that are	\$ 504.00 .00
Hou fill in Hou 9a.	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages. To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	nses: Using the number of people you entered in line 5, e and operating expenses. I in the dollar amount \$ 892 Ind other debts secured by your home. Indicate a secured by your home.	
fill in Hou	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insurance using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.	nses: Using the number of people you entered in line 5, e and operating expenses. I in the dollar amount \$ 892 Ind other debts secured by your home. It all amounts that are months after you file Average monthly payment \$ Copy line	.00
fill in Hou	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insuran using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense. Total average monthly payment for all mortgages To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor -NONE-	nses: Using the number of people you entered in line 5, e and operating expenses. I in the dollar amount \$ 892 Ind other debts secured by your home. If all amounts that are months after you file Average monthly payment \$ Copy line	.00 Repeat this amount
Hot fill in 9a.	using and utilities - Insurance and operating exp n the dollar amount listed for your county for insuran using and utilities - Mortgage or rent expenses: Using the number of people you entered in line 5, listed for your county for mortgage or rent expense Total average monthly payment for all mortgages To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60. Name of the creditor -NONE-	ses: Using the number of people you entered in line 5, e and operating expenses. If in the dollar amount \$ 892 Ind other debts secured by your home. Ind all amounts that are months after you file Average monthly payment Summary Copy line 9b here=> -\$ Indicate the first point of people you entered in line 5, e and operating expenses.	.00 Repeat this amoun

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

page 2

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Debtor 1	Elaii
Debtor 2	Herk

Elaine K Croxton Herbert P Croxton

_			
Case	number	(if knowr	7)

11. Local transportation expenses: Check the number of vehic	cles for which you claim an	ownership or operatin	g expense.
□ 0. Go to line 14.			
_			
☐ 1. Go to line 12.			
2 or more. Go to line 12.			
12. Vehicle operation expense: Using the IRS Local Standards	s and the number of vehicle	es for which you claim	the
operating expenses, fill in the Operating Costs that apply for	your Census region or met	ropolitan statistical are	ea. \$ <u>0.00</u>
 Vehicle ownership or lease expense: Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles. 			
Vehicle 1 Describe Vehicle 1:			
13a. Ownership or leasing costs using IRS Local Standard	13a.	\$ 0.00	
13b. Average monthly payment for all debts secured by Vehicle 1			
Do not include costs for leased vehicles.			
To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then dived by 60.			
Name of each creditor for Vehicle 1	Average monthly payment		
	\$		
	Copy 13b here =>	-\$ 0.00	
13c. Net Vehicle 1 ownership or lease expense			Copy net
Subtract line 13b from line 13a. if this amount is less than \$0), enter \$0. 13c.	\$ 0.00	Vehicle 1 expense
	100.	Φ	here => \$
Vehicle 2 Describe Vehicle 2:			
10d Own authin au leasing agate using IDC Least Standard	104		
13d. Ownership or leasing costs using IRS Local Standard13e. Average monthly payment for all debts secured by Vehicle 2	13d.	\$0.00	
leased vehicles.	. Do not include costs for		
Name of each creditor for Vehicle 2	Average monthly payment		
	\$		
	Copy 13e here =>	-\$ 0.00	
13f. Net Vehicle 2 ownership or lease expense			Copy net
Subtract line 13e from line 13d. if this number is less than \$0		\$ 0.00	Vehicle 2 expense here => \$ 0.00
	13f.	\$	here => \$
14. Public transportation expense: If you claimed 0 vehicles in	n line 11. using the IRS Loc	al Standards, fill in the	⊒ e Public
Transportation expense allowance regardless of whether you	use public transportation.	ŕ	\$
15. Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in w not claim more than the IRS Local Standard for <i>Public Trans</i>	hat you believe is the appr		
	:		

Official Form 22C-2

Oth	er Necessary Expenses In addition to the expense deductions listed above, you are allowed your monthly expenses the following IRS categories.	for					
16.	Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes.						
	Do not include real estate, sales, or use taxes.	\$	0.00				
17.	Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement						
	contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00				
18.	 Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term. 						
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments.						
	Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00				
20.	Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or						
	for your physically or mentally challenged dependent child if no public education is available for similar services.	\$	0.00				
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.						
	Do not include payments for any elementary or secondary school education.	\$	0.00				
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.						
23.	Optional telephone and telephone services: The total monthly amount that you pay for telecommunication						
	services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.						
	Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 22C-1, or any amount you previously deducted.						
24.	Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23.	\$\$	8.00				
Add	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.						
25.	Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	r					
	Health insurance \$ 0.00						
	Disability insurance \$ 0.00						
	Health savings account + \$ 0.00						
	Total \$ Copy total here=>	\$\$	0.00				
	Do you actually spend this total amount? No. How much do you actually spend? Yes \$						
26.	Continued contributions to the care of household or family members. The actual monthly expenses that you will						
	continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.	\$	0.00				
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.						
	By law, the court must keep the nature of these expenses confidential.	\$	0.00				

Official Form 22C-2

Debtor 1	Elaine K Croxton
Debtor 2	Herbert P Croxtor

Case number (if known)

	Additional home energy costs. Your hom allowance on line 8.	ne energy costs are included in your non-mortgage hou	ising a	nd utilities		
		costs that are more than the home energy costs include ice, then fill in the excess amount of home energy costs		ne		
	You must give your case trustee document amount claimed is reasonable and necessations.	tation of your actual expenses, and you must show that ary.	t the a	dditional	\$_	0.
		dren who are younger than 18. The monthly expense ependent children who are younger than 18 years old to				
	You must give your case trustee document claimed is reasonable and necessary and i	tation of your actual expenses, and you must explain w not already accounted for in lines 6-23.	hy the	amount		
	* Subject to adjustment on 4/01/16, and ev	ery 3 years after that for cases begun on or after the da	ate of	adjustment.	\$	0.
	D. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.					
		tional allowance, go online using the link specified in th so be available at the bankruptcy clerk's office.	ne sepa	arate		
	You must show that the additional amount	claimed is reasonable and necessary.			\$_	0.
	Continuing charitable contributions. The instruments to a religious or charitable organizations.	e amount that you will continue to contribute in the form anization. 11 U.S.C. § 548(d)3 and (4).	n of ca	sh or financial	\$	0.
	Add all of the additional expense deduc Add lines 25 through 31.	tions			\$	0.00
Dedu	actions for Debt Payment					
C	reditor in the 60 months after you file for ba Mortgages on your home	ankruptcy. Then divide by 60.				nge monthly
33a.	Copy line 9h here			=>	paym \$	ent 0.00
oou.	Loans on your first two vehicles				Ψ	0.00
33b.	•			=>	\$	0.00
33c.					<u> </u>	0.00
	e of each creditor for other secured debt	Identify property that secures the debt	Doe	es payment ude taxes	Ψ	0.00
		1916 Lincoln Way NW, Massillon OH		nsurance?		
		44647	_	No		
33d.	Fifth Third Bank	#605924 & #616597 (Vacant Land)		Yes	\$	907.78
		519 Woodside Ave. NE, North Canton OH 44720		No		
33e.	Fifth Third Bank	#9208645		Yes	\$	630.50
.01	Fifth Third Bank	6092 Fulton Dr. NW, Canton OH 44718 #1615852		No	•	459.18
33f.	- I IIII I IIII Buik			Yes	\$	400.10
	Fifth Third Bank	327 Lennox Ave. NW, Massillon OH 44646 #4304326		No Yes	\$	445.66
		8216-8218 Turquoise Ave. NE, Canton OH		No	•	
	Home Savings	44721 #5213701	_	Yes	\$	356.41

Official Form 22C-2

Chapter 13 Calculation of Your Disposable Income

page 5

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Debtor 1 Elaine K Croxton
Debtor 2 Herbert P Croxton

Case number (if known)

Home Savings	8230-8232 Turquoise Ave. NE, Canton OH 44721 #5213702	■ No □ Yes	\$	356.40
Huntington Bank	3965 Orion St. NW, North Canton OH 44720 #5501101	■ No □ Yes	\$	641.58
g. Total average monthly payment.	Add lines 33a through 33f \$	3,797.51	Copy total here=>	3,797.51

Debtor 1 Elaine K Croxton
Herbert P Croxton

Case number (if known)

	debts that you listed in line property necessary for you				2,		
■ No.	Go to line 35.						
	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill in	ssession of your property					
Name of the	creditor	Identify property that second	ures the del	bt	Total cure amount		nthly cure ount
-NONE-				\$		÷ 60 = \$	
						Сору	
				Total	\$0.00	total	\$
	owe any priority claims - su past due as of the filing da						
■ No.	Go to line 36.						
	Fill in the total amount of all ongoing priority claims, such			ude current or			
	Total amount of all past-d	ue priority claims			\$	<u> </u>	\$
36. Projecte	d monthly Chapter 13 plan	payment			\$	_	
Office of the Exec To find a li	nultiplier for your district as s the United States Courts (fo utive Office for United States st of district multipliers that includenstructions for this form. This list	r districts in Alabama and s Trustees (for all other dis des your district, go online usir	North Car stricts). ng the link sp	olina) or by	x	_	
Average	monthly administrative expe	nse			\$	Copy total here=> \$	
	of the deductions for debtes 33g through 36.	payment.					\$3,797.51_
Total Deduc	tions from Income						
38. Add all d	of the allowed deductions.						
Copy lir	ne 24, All of the expenses all	lowed under IRS	\$	2,608.00	<u>.</u>		
Copy lir	ne 32, All of the additional ex	pense deductions	\$	0.00			
	ne 37, All of the deductions f			3,797.51	- <u>-</u> _		
Total de	eductions		\$	6,405.51	Copy total here=	> \$	6,405.51

Official Form 22C-2

Debtor 1 Debtor 2 Elaine K Croxton Herbert P Croxton

Case number (if known)

Part 2	2 : De	etermine You	r Disposable Income Under 11 U.S.C. § 13	25(b)(2)		
39.	Copy yo	our total curr ent of Your C	ent monthly income from line 14 of Form 2 Current Monthly Income and Calculation of	22C-1, Chapter 13 Commitment Period		\$ 6,471.50
40.	children disability received	 The monthly payments for displaying in accordance 	y necessary income you receive for supporty average of any child support payments, for a dependent child, reported in Part I of Formore with applicable nonbankruptcy law to the ended for such child.	\$0	.00	
41.	employe in 11 U.	er withheld fro S.C. § 541(b)(etirement deductions. The monthly total of a m wages as contributions for qualified retirem (7) plus all required repayments of loans from § 362(b)(19).	nent plans, as specified	\$0	.00_
42.	Total of	all deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A).	Copy line 38 here=>	\$ 6,405	<u>.51</u>
43.	expense their exp	es and you ha benses. You n	al circumstances. If special circumstances judy no reasonable alternative, describe the spenust give your case trustee a detailed explanation for the expenses.	ecial circumstances and		
De	scribe th	ne special cir	cumstances	Amount of expens	se	
4	3a			\$		
43	3b			\$		
4	3c			\$	<u> </u>	
4:	3d. Tot a	al. Add lines 4	3a through 43c.		Copy 43d here=> \$	0.00
44.	Total ad	ljustments. A	add lines 40 through 43d.	=> \$	6,405.51	Copy total
45.	Calcula	te your mont	hly disposable income under § 1325(b)(2).	. Subtract line 44 from lin	e 39.	\$65.99
Part 3	B: CI	nange in Inco	ome or Expenses			
46.	reported filed you informat petition,	I in this form here bankruptcy tion below. Fo check 22C-1 es increased,	r expenses. If the income in Form 22C-1 or the nave changed or are virtually certain to change petition and during the time your case will be rexample, if the wages reported increased are in the first column, enter line 2 in the second fill in when the increase occurred, and fill in the second s	e after the date you open, fill in the fter you filed your column, explain why		
For	m	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2 22C-1 22C-2				☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Decrease ☐ Decrease ☐ Decrease	\$ \$ \$

Official Form 22C-2

Debtor 1 Debtor 2	Elaine K Croxton Herbert P Croxton	Case number (if known)	

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Elaine K Croxton
Elaine K Croxton
Signature of Debtor 1

Date June 26, 2015
MM / DD / YYYY

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

X /s/ Herbert P Croxton
Herbert P Croxton
Signature of Debtor 2

Date June 26, 2015
MM / DD / YYYY